

FORM 1449*				Docke	et Number:		Applica	tion Number:		
OF	SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT				NOKV.013CIP			10/600,011		
01, - 4	(Use several s	Applicant: Byman-Kivivuori et al.								
2 F 2000	(Use several s	heets if necessar	у)	Filing	Date: 06/19/2	003	Group A	Art Unit: 2614		
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EXAMINER INITIAL	DOCUMENT NO.	DATE	NAME		CLASS	SUBC	LASS	FILING IF APPR	DATE OPRIATE	
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	DOCUMENT NO.					SUBC	LASS	TRANS	LATION	
/C.S./	DOCUMENT NO. WO00074406					SUBC	LASS	_		
/C.S./		DATE	COUNTRY			SUBC	LASS	YES		
	WO00074406	DATE 12/07/00	COUNTRY			SUBC	LASS	YES X		
/C.S./	W000074406 W001006507	12/07/00 01/25/01	WO WO			SUBC	LASS	YES X X		
/C.S./	WO00074406 WO01006507 WO01017297	12/07/00 01/25/01 03/08/01	WO WO WO			SUBC	LASS	YES X X X		
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EXAMINER	/Creighton Smith/	DATE CONSIDERED	06/23/2008					
EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609; draw line through citation if not in conformance and not considered. Include copy of this form for next communication to the Applicant.								